



Supplemental Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: WEB GUIDE AND METHOD
Attorney Docket Number:: 1510-1071
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 2
Total Drawing Sheets:: 2
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: NIKLAS
Middle Name::
Family Name:: PETTERSSON
Name Suffix::
City of Residence:: ENKOPING
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing FAGERSKOGSGATAN 41
Address::
City of Mailing Address:: ENKOPING
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: 754 39

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMAN/UNITED STATES
Status:: Full Capacity
Given Name:: HANKO
Middle Name::
Family Name:: KIESSNER
Name Suffix::
City of Residence:: SALT LAKE CITY
State or Province of
Residence:: UTAH
Country of Residence:: UNITED STATES
Street of Mailing 7418 SUNHILL CIRCLE
Address::
City of Mailing Address:: SALT LAKE CITY

State or Province of Mailing Address:: UTAH
Country of Mailing Address:: UNITED STATES
Postal or Zip Code of Mailing Address:: 84121

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignment Information

Assignee Name::
Street of Mailing
Address::
City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address::
Postal or Zip Code of Mailing Address::